

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	Mr. G		12/11/99
O.I.P.E. CLASSIFIER	101		12/11/99
FORMALITY REVIEW	59158		12/11/00

INDEX OF CLAIMS

Rejected N: Non-elected
 Allowed I: Interference
 (Through numeral) Canceled A: Appeal
 Restricted O: Objected

Claim	Date	Claim	Date	Claim	Date
51		51		110	
52		52		111	
53		53		112	
54		54		113	
55		55		114	
56		56		115	
57		57		116	
58		58		117	
59		59		118	
60		60		119	
61		61		110	
62		62		111	
63		63		112	
64		64		113	
65		65		114	
66		66		115	
67		67		116	
68		68		117	
69		69		118	
70		70		119	
71		71		120	
72		72		121	
73		73		122	
74		74		123	
75		75		124	
76		76		125	
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78		78		127	
79		79		128	
80		80		129	
81		81		130	
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83		83		132	
84		84		133	
85		85		134	
86		86		135	
87		87		136	
88		88		137	
89		89		138	
90		90		139	
91		91		140	
92		92		141	
93		93		142	
94		94		143	
95		95		144	
96		96		145	
97		97		146	
98		98		147	
99		99		148	
100		100		149	
				150	

If more than 150 claims or 10 actions
staple additional sheet here

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